

# CLAIMS ONLY

SERIAL NO. \_\_\_\_\_

FILING DATE \_\_\_\_\_

APPLICANT(S) \_\_\_\_\_

## CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1	1					
2						
3	1	1				
4	1					
5	1					
6	1					
7	1					
8	1					
9	1					
10						
11						
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47						
48						
49						
50						
TOTAL IND.	8	1	1	1	1	1
TOTAL DEP.	1	1	1	1	1	1
TOTAL CLAIMS	9	1	1	1	1	1

	*	*	*	*
	IND.	DEP.	IND.	DEP.
51				
52				
53				
54				
55				
56				
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94				
95				
96				
97				
98				
99				
100				
TOTAL IND.		1	1	1
TOTAL DEP.		1	1	1
TOTAL CLAIMS		1	1	1

\* MAY BE USED FOR ADDITIONAL CLAIMS OR AMENDMENTS

BEST AVAILABLE COPY